



NC DEPARTMENT OF **HEALTH AND HUMAN SERVICES**

Updated Guidance on Outdoor Visitation for Larger Residential Settings (Adult Care Homes, Behavioral Health/IDD, Intermediate Care Facilities, Psychiatric Residential Treatment Facilities)

June 26, 2020

To prevent outbreaks of COVID-19 in residential care facilities, federal authorities recommended restricting visitation. We recognize that these restrictions have consequences to the overall health and well-being of residents and their families. We also recognize that residential care facilities are at risk of experiencing outbreaks of COVID-19 and the residents of these facilities are often in a high-risk category for serious complications from COVID-19. We strongly encourage the continued use of technology to keep connected as much as possible.

To balance the needs of families and residents to see each other in person with the need to protect residents from COVID-19, this guidance outlines strict criteria for allowing outdoor visitation. Current data indicate that risk of transmission in outdoor settings is lower compared to indoor settings. This guidance excludes skilled nursing facilities, including combination skilled nursing/adult care assisted living facilities. This guidance is for adult care homes, behavioral health/IDD, intermediate care facilities, and psychiatric residential treatment facilities (PRTF) **with 7 or more beds**. (Facilities with 6 or fewer beds should refer to “Guidance for Smaller Residential Settings Regarding Visitation, Communal Dining, Group and Outside Activities” available [here](#)).

This document provides guidance on outdoor visitation. Facilities should continue to restrict indoor visitation, communal dining and group activities.

Facilities that re-open to visitors in outdoor locations must first meet the following prerequisites:

- Facility must not be listed on the [N.C. DHHS COVID](#) website as having an ongoing outbreak.
- Facility has a written testing plan and action plan based on testing in place. Facilities should:
 - Pre-identify a community partner or laboratory vendor to conduct testing in the event of a case or outbreak.
 - Determine who will write medical orders for residents and staff.
 - Determine who will collect specimens.

- The physical layout of the outdoor visitation spaces must allow for appropriate social distancing of at least 6 feet between residents and visitors.
- Any structures built or modifications made to the facility (including any outdoor space) to facilitate visitation cannot violate any N.C. Building Code, Life Safety Code, or any other building safety ordinance. Any modifications to the indoor or outdoor space of a facility to accommodate safe visitation must be pre-approved by the DHSR Construction Section.

A residential care facility that allows in-person visitation in a designated outdoor visitation space after meeting the above criteria, must implement all of the following requirements:

Facility Requirements:

- Facility should require scheduling of visits in advance and visits should be dependent on availability of suitable outdoor space and sufficient staffing and PPE at the facility to meet resident care needs.
- Outdoor visitation spaces must provide adequate protection from weather elements and only occur at times when there are no weather warnings that would put visitors or residents at risk.
- Facility should ensure appropriate personal care and supervision are provided for the safety of the resident by taking into consideration the needs of the resident and the situation. Some of these factors to be considered may include but are not limited to: the need for sunscreen, hydration, plan for supervising residents with wandering or other behaviors, appropriate clothing for the weather, and conditions or medications that may cause the resident to be heat-sensitive.
- Facility should establish procedures for conducting pre-visit orientation to, and screenings of, visitors to include presence of symptoms and known exposure to COVID-19, and ensure visitors bring and wear a mask for face covering.
- Visitor must be screened for fever or and other symptoms associated with COVID-19 (fever equal to or greater than 100.0 F, cough, shortness of breath, sore throat, muscle aches, chills or new onset of loss of taste or smell) prior to resident being transported to the designated space
- Facility must provide alcohol-based hand rub to visitors and demonstrate how to use it appropriately if necessary.
- A residential care facility staff member trained in patient safety and infection control measures must available to transport residents to and from the visitation session, screen the visitors, and remind the visitors of the visitation protocols and infection prevention measures to be taken during the visit. The facility shall ensure privacy for the resident and their visitors.
- Staff must wear a surgical face mask for the duration of the visit.
- Designated area must be sanitized with EPA-registered disinfectant after each visit and as needed.
- Designated area for the resident and for the visitors should be clearly marked maintaining 6 feet or more of separation.
- A residential care facility should accommodate outdoor visitation to the greatest extent possible for each resident. The facility may limit the length of any visit, the

days on which visits will be permitted, the hours during a day when visits will be permitted, and the number of times during a day or week visitation may occur.

- Facility must communicate visitation requirements to residents, families and responsible parties, and must have a reasonable basis for modifying visitation requirements and reducing visitation opportunities.

Resident Requirements:

- Residents must have the ability (with or without assistance) to safely transition from their room to the visitation location and remain safe in the designated location.
- Resident should not be transported through any space designated as COVID-19 care space or space where residents suspected or confirmed to be infected with COVID-19 are present. Residents should wear a face mask or face covering while moving through the facility.
- Prioritization for visitation should be considered for residents with emotional distress, or when health and well-being are exacerbated by visitation restrictions.
- Residents should wear a face mask or face covering during the visitation.

Visitor Requirements

- Visitors must cooperate with the facility's screening process at each visit and attest to not having signs or symptoms or current diagnosis of COVID-19; if they have had COVID-19, they must provide documentation (e.g., doctor's note) that they no longer meet CDC criteria for transmission-based precautions.
- Any individuals with symptoms of COVID-19 infection (fever equal to or greater than 100.0 F, cough, shortness of breath, sore throat, muscle aches, chills or new onset of loss of taste or smell) should not be permitted to visit with a resident.
- Visitors must be limited to no more than two individuals at a time per resident. Children visitors must be able to wear a face covering or mask during the entire visitation and remain with their guardian who will be responsible for assuring that all safety measures are followed.
- Visitors must bring and wear a face covering or mask covering both the mouth and nose for the entire visit or wear a facility-provided surgical mask covering both the mouth and nose if the facility requires.
- Visitors must use alcohol-based hand rub before and after visitation.
- Visitors must stay in the designated outdoor facility locations.
- Visitors must only visit the resident they intended to visit.
- Visitors must remain at least 6 feet from the resident and staff at all times (exceptions can be made in compassionate care circumstances) during the visit.
- Any visitor who develops a diagnosis of COVID-19 or signs and symptoms such as fever, cough, shortness of breath, sore throat, muscles aches, chills, or new onset loss of smell or taste within 2 days of visiting a resident must immediately notify the facility of the date they were visiting and the resident they were in contact with. Residential care facilities should immediately screen the resident who had contact with the visitor and follow up with the facility's medical director or resident's care provider.
- Any visitor who fails to follow the facility's requirements shall not be permitted future visitation, except in a compassionate care situation (e.g., end of life).

Facilities should have discretion to alter visitation practices based on disease transmission in the facility or community, visitor non-compliance, or other factors.

Additional information for family members: Community-based resources to support long-term care residents at home may be available. If a family member is interested in learning about options for supporting a loved one at home, please contact the facility's social worker/administrator or the long-term care Ombudsman for resources that may be available.